

MULTIPLE DEPEN. CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/552 656

FILING DATE

Art 34

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	1		1				
2		1		1			
3	1		1				
4		1		1			
5		2					
6		2					
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47		2					
48		2					
49		2					
50		2					
TOTAL IND.	2		2				
TOTAL DEP.	11		12				
TOTAL CLAIMS	13		14				

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
51							
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100							
TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							